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NO. 8388 P. 4

OCT 12 2005

PTO/SB/22 (12-04)

Approved for use through 7/31/2006, OMB 0651-0031

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

FY 2005

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Application Number

09/476,877-Conf. #8423

Docket Number (Optional)

21736-00010-US

Filed January 3, 2000

## COMPUTER IMPLEMENTED METHODS AND APPARATUS FOR AUCTIONS

For COMPUTER IMPLEMENTED METHODS AND APPARATUS FOR AUCTIONS  
Art Unit 3628

Examiner

F. Poinvil

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 225.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

- Applicant claims small entity status. See 37 CFR 1.27.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-203B is attached.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0185. I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record. Registration Number \_\_\_\_\_

attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34

24,351

October 12, 2005

Date

(202) 331-7111

Telephone Number

Stanley B. Green

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

10/13/2005 EAREGAY1 00000086 220185 09476877

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NO. 8388 P. 3

OCT 12 2005

PTO/SB/17 (12-04v2)

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Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.  
**Effective on 12/08/2004.**  
**Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**

## FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

<b>TOTAL AMOUNT OF PAYMENT</b>	(\$)
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Complete if Known

Application Number	09/476,877-Conf. #8423
Filing Date	January 3, 2000
First Named Inventor	Lawrence M. Ausubel
Examiner Name	F. Polnyil
Art Unit	3628
Attorney Docket No.	21736-00010-US

**METHOD OF PAYMENT** (check all that apply)

<input type="checkbox"/>	Check	<input type="checkbox"/>	Credit Card	<input type="checkbox"/>	Money Order	<input type="checkbox"/>	None	<input type="checkbox"/>	Other (please identify):
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number, <u>22-0185</u> Deposit Account Name: <u>Connolly Bove Lodge &amp; Hutz LLP</u>									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
<input type="checkbox"/>	Charge fee(s) indicated below	<input type="checkbox"/>	Charge fee(s) indicated below, except for the filing fee						
<input checked="" type="checkbox"/>	Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/>	Credit any overpayments						

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Rcissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)  
 Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee Paid (\$)
107	0	x	=		
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)		
12	0	x	=		

Total Sheets	Extra Sheets	Number of each additional sheet or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50	(round up to a whole number) x		Fee Paid (\$)

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)  
 Other (e.g., late filing surcharge): 2251 Extension for response within second month

225.00

SUBMITTED BY	<i>Stanley J. Green</i>	Registration No. (Attorney/Agent)	24,351	Telephone	(202) 331-7111
Signature				Date	October 12, 2005
Name (Print/Type)	Stanley J. Green				

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